



# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application No. 10/750,066

Filing Date December 30, 2003

First Named Inventor Gregor K. Frey

Art Unit 2122

Examiner Name Unassigned

Total Number of Pages in This Submission

15

Attorney Docket Number 6570P051

## ENCLOSURES (check all that apply)

☒ Fee Transmittal Form

☐ Fee Attached

☐ Amendment / Reply

☐ After Final

☐ Affidavits/declaration(s)

☐ Extension of Time Request

☐ Express Abandonment Request

☒ Information Disclosure Statement

☒ PTO/SB/08

☐ Certified Copy of Priority Document(s)

☐ Response to Missing Parts/Incomplete Application

☐ Basic Filing Fee

☐ Declaration/POA

☐ Response to Missing Parts under 37 CFR 1.52 or 1.53

☐ Drawing(s)

☐ Licensing-related Papers

☐ Petition

☐ Petition to Convert a Provisional Application

☐ Power of Attorney, Revocation Change of Correspondence Address

☐ Terminal Disclaimer

☐ Request for Refund

☐ CD, Number of CD(s)

☐ Landscape Table on CD

☐ After Allowance Communication to TC

☐ Appeal Communication to Board of Appeals and Interferences

☐ Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)

☐ Proprietary Information

☐ Status Letter

☒ Other Enclosure(s) (please identify below):

Return postcards (2)  
NPL documents (6).

Remarks

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm  
or  
Individual name

Robert B. O'Rourke, Reg. No. 46,972

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

Signature

Date

4/16/07

## CERTIFICATE OF MAILING/TRANSMISSION

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Typed or printed name

Carla Vignola

Signature

Date

4-16-07

APR 19 2007

# FEE TRANSMITTAL for FY 2006

Patent fees are subject to annual revision.

Complete if Known

Application Number	10/750,066
Filing Date	December 30, 2003
First Named Inventor	Gregor K. Frey
Examiner Name	Unassigned
Art Unit	2122
Attorney Docket No.	6570p051

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 0.00

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☒ None ☐ Other (please identify):

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

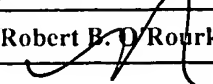
☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayment of fee(s) ☒ Credit any overpayments  
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

## FEE CALCULATION

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052		2052		Surcharge - late provisional filing fee or cover sheet.	
2053		2053		Non-English specification	
1251		2251		Extension for reply within first month	
1252		2252		Extension for reply within second month	
1253		2253		Extension for reply within third month	
1254		2254		Extension for reply within fourth month	
1255		2255		Extension for reply within fifth month	
1401		2401		Notice of Appeal	
1402		2402		Filing a brief in support of an appeal	
1403		2403		Request for oral hearing	
1451		2451		Petition to institute a public use proceeding	
1460		2460		Petitions to the Commissioner	
1807		1807		Processing fee under 37 CFR 1.17(q)	
1806		1806		Submission of Information Disclosure Stmt	
1809		1809		Filing a submission after final rejection (37 CFR § 1.129(a))	
1810		2810		For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify) Submission of IDS prior to receiving first office action.					0.00
SUBTOTAL (2)				(\$)	0.00

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Robert B. O'Rourke	Registration No. (Attorney/Agent)	46,972	Telephone	(408) 720-8300
Signature		Date	4/16/07		



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re the Application of:

GREGOR K. FREY, ET AL.

Application No.: 10/750,066

Filed: December 30, 2003

For: **System and Method Employing Bytecode  
Modification Techniques For Tracing  
Services Within An Application Server**

Art Group: 2122

Examiner: Unassigned

**INFORMATION DISCLOSURE STATEMENT UNDER 37 C.F.R. §1.97**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

In accordance with the duty of disclosure, enclosed is a copy of IDS Citation Form PTO/SB/08 or PTO-1449, together with copies of the documents cited on that form, except for copies not required to be submitted (e.g., copies of U.S. patents and U.S. published patent applications need not be enclosed). This IDS and IDS Citation Form are being submitted before the mailing of a first Office Action. It is respectfully requested that the cited references be considered and that the enclosed copy of PTO/SB/08 be initialed by the Examiner to indicate such consideration and a copy thereof returned to applicant(s).

The submission of this Information Disclosure Statement is not to be construed as a representation that a search has been made in the subject application and is not to be construed as an admission that the information cited in this statement is material to patentability.

Please charge any fees due to Deposit Account 02-2666. A duplicate copy of the Fee Transmittal (PTO/SB/17) is enclosed for this purpose.

Date: \_\_\_\_\_

4/16/07

Respectfully submitted,

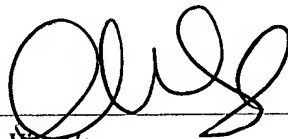
BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

Robert B. O'Rourke, Reg. No. 46,972

12400 Wilshire Boulevard, 7th Floor  
Los Angeles, CA 90025  
Telephone: (408) 720-8300

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Carla Vignola



Date

4-16-07

Substitute for Form 1449/PTO

Complete if Known

## INFORMATION DISCLOSURE

## STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet **1** of **2** Application Number **10/750.066**  
 Filing Date **12-30-2003**  
 First Named Inventor: **Gregor K. Frey**  
 Art Unit **2122**  
 Examiner Name **Unassigned**  
 Attorney Docket Number **6570P051**

## U.S. PATENT DOCUMENTS

Examiner Initials*	Cite No. <sup>1</sup>	Document Number		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code <sup>2</sup> (If known)				
		US-	5,748,963	05-05-1998	Orr	
		US-				
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## FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
		Country Code <sup>3</sup>	Number <sup>4</sup> Kind Code <sup>5</sup> (if known)				

Examiner  
Signature

Date Considered

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup>Applicant's unique citation designation number (optional). <sup>2</sup>See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup>Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup>For Japanese patent documents, the indication of the year of reign of the Emperor must precede the serial number of the patent document. <sup>5</sup>Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. <sup>6</sup>Applicant is to place a check mark here if English language translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SENT FEES OR COMPLETED FORMS TO THIS ADDRESS.  
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